

**APPLICANT MUST FILL OUT  
THE FORM COMPLETELY**



Department of Public Safety  
**STATE FIRE MARSHAL'S OFFICE**  
 52 State House Station  
 Augusta, ME 04333-0052



**APPLICATION FOR INSPECTION,  
PERMIT, OR LICENSE.**

Tel. (207) 626-3880

FAX: (207) 287-6251

**APPLICATION FOR FIREWORKS TECHNICIAN LICENSE**

CHECK ONE

APPLICATION FOR NEW TECHNICIAN:

APPLICATION FOR RENEWAL:

New applicant Fee: \$180.00

Renewal Fee: \$25.00

HAVE ANY OF YOUR PREVIOUS PERMITS BEEN REVOKED FOR ANY REASON?

NO

YES

In accordance with the provisions of R.S., Title 8, Sec 231, as amended, application is hereby made for a permit to discharge, fire off or explode fireworks. A records check will be conducted on all applicants. Misrepresentation will be grounds for automatic disapproval of permit. In addition to the amounts listed above the applicant must submit \$21.00 fee to cover the cost of the records check.

Name:

\_\_\_\_\_  
 LAST MIDDLE FIRST LEGAL RESIDENCE

\_\_\_\_\_  
 Mailing address:

\_\_\_\_\_  
 City: State Zip Code DATE OF BIRTH

Telephone: \_\_\_\_\_

In the past five years have you been convicted of any of the following crimes and if so list the same. Family Abuse, failure to meet family support obligations, 3 or more class D or class E crimes, 3 or more civil violations, or any other violation with records indicating applicant has engaged in recklessness or negligence that endangered the safety of others?

YES \_\_\_\_\_ NO \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

Applicants must include two passport type photos of themselves measuring 1 inch by 1 inch with this application. Photos can be taken at the Augusta Office from 8:00 am to 4:00 p.m. Monday through Friday. Also the applicant must review the attached ID form for accuracy and sign the ID form prior to returning this form for processing.



PLEASE MAKE ANY CHANGES IN THE FORM BELOW



LIST ANY CHANGES HERE

NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

HEIGHT \_\_\_\_\_

WEIGHT \_\_\_\_\_

COLOR OF EYES \_\_\_\_\_

HAIR COLOR \_\_\_\_\_

<p style="font-size: 48px; opacity: 0.5;">S A</p>		<p>STATE OF MAINE LICENSE</p>			IDENTIFICATION ONLY
		<p><b>FIREWORKS TECHNICIAN</b></p>			
<p>SIGNATURE _____</p>		<p>NAME _____</p>			
		<p>DATE OF BIRTH _____</p>			
		<p>COMPANY _____</p>			
<p>LICENSE NO. _____</p>		<p>HEIGHT _____</p>	<p>WEIGHT _____</p>	<p>EYES _____</p>	
		<p>DATE ISSUED _____</p>		<p>DATE EXPIRES _____</p>	



**DEPARTMENT OF PUBLIC SAFETY USE ONLY**



Fee For renewal: \$25.00  
 New License Fee: \$180.00  
 Add \$21.00 for Background  
 Check DATE: \_\_\_\_\_

SENT TO INSPECTOR  
 FOR TESTING?  
 DATE: \_\_\_\_\_

TEST GIVEN  
 DATE: \_\_\_\_\_

PERMIT ISSUED  
 DATE: \_\_\_\_\_

PERMIT # \_\_\_\_\_